

FORM TO BE USED BY A STATE PRISONER IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. SECTION 1983 OR BY A FEDERAL PRISONER IN FILING A BIVENS CLAIM.

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NORTH CAROLINA  
WESTERN DIVISION

**FILED**

MAR 15 2004

U.S. DISTRICT COURT  
E. DIST. NO. CAR.

NO. 5-04-CT-176-FL  
(leave this space blank)

Lloyd R. Winburn  
Michael A Wall  
(enter full names of each plaintiff(s))

Inmate Number 20872-112

v.

Inmate Number 16656-058

Gary L. Winkler  
Douglas E. Willis  
Dr. Marcos Ramirez  
(enter full names of each defendant(s))

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- I. HAVE YOU BEGUN OTHER LAWSUITS IN FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION? YES ( ) NO (☒)

If your answer is YES, describe the former lawsuit in the space provided below:

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- II. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT TO THE STATE INMATE GRIEVANCE PROCEDURE? YES (☒) NO ( )

If your answer is YES:

1. What steps did you take?  
2. What was the result? (Attach copies of grievances or other supporting documentation.)

See Attached ~~copy~~ copy # 1

## VERIFIED STATEMENT

I have been advised of the requirements regarding exhaustion of administrative remedies and now submit this verified statement.

(Please choose the box that applies to your action):

☐ There are no grievance procedures at the correctional facility at which I am being confined.

This cause of action arose at \_\_\_\_\_, and I am now being housed at \_\_\_\_\_. Therefore, I do not believe I have administrative remedies relating to this complaint at this time.

☒ I have exhausted by administrative remedies relating to this complaint and have attached copies of grievances demonstrating completions.

## III. PARTIES:

In Item "A" below, place your name in the first blank and your present address in the second blank. Do the same for additional plaintiffs, if any. NOTE: ALL PLAINTIFFS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

A. Name of Plaintiff : Lloyd R. Winburn and Michael A. Wall  
 Name of Present Confinement Seymour Johnson AFB 53 FPC  
 Address of Present Confinement Goldsboro N.C. 27533-8004

In Item "B" below, place the full name of defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use Item (C) through (F) for additional defendants. NOTE: ALL DEFENDANTS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

B. Defendant Gary L. Winkler  
 Position Warden  
 Employed at Seymour Johnson Federal Prison Camp  
 Address Goldsboro, N.C. 27533-8000  
 Capacity in which being sued: Individual ( ) Official ( ) Both ( ☒ )

C. Defendant Douglas E. Willis  
 Position Unit Manager  
 Employed at Seymour Johnson Federal Prison Camp  
 Address Goldsboro, N.C. 27533-8004  
 Capacity in which being sued: Individual ( ) Official ( ) Both ( ☒ )

D. Defendant Dr. Marcos Ramirez  
 Position Clinical Medical Director  
 Employed at Seymour Johnson Federal Prison Camp  
 Address Goldsboro N.C. 27533-8000  
 Capacity in which being sued: Individual ( ) Official ( ☒ ) Both ( )

E. Defendant \_\_\_\_\_  
 Position \_\_\_\_\_  
 Employed at \_\_\_\_\_  
 Address \_\_\_\_\_  
 Capacity in which being sued: Individual ( ) Official ( ) Both ( )

F. Defendant \_\_\_\_\_  
 Position \_\_\_\_\_  
 Employed at \_\_\_\_\_  
 Address \_\_\_\_\_  
 Capacity in which being sued: Individual ( ) Official ( ) Both ( )

#### IV. STATEMENT OF CLAIM

State here as briefly as possible the **FACTS** of your case. Describe how **each** defendant is involved. Include also the names of the other persons involved, dates and places. **DO NOT GIVE ANY LEGAL CITATIONS OR ANY LEGAL ARGUMENTS OR CITE ANY STATUTES.** If you wish to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheets if necessary.

1. Unit manager Willis retracted with wardens Winker's knowledge a 13 year dormitory regulation that allowed inmates who when needed and did not interfere with work to lie down <sup>and</sup> rest during the hours of 8:00am to 3:00pm
2. The defendants Willis and Winker conspired with medical director Ramirez to deny plaintiffs and other like inmates medical and humane passes needed to avoid irreparable injury and gratuitous pain and suffering.
3. Defendant Ramirez acted with deliberate indifference in denying plaintiffs' serious medical needs.
4. Defendants Willis and Winker deprived plaintiffs rights under the Due Process Clause of the 14th Amendment to the United States Constitution

by thwarting administrative remedies and blocking of typical prison procedures.

V. RELIEF SOUGHT BY PRISONER

State briefly exactly what you want the Court to do for you. **MAKE NO LEGAL ARGUMENTS. DO NOT CITE CASES OR STATUTES.**

- (1) Enter preliminary and permanent injunctions ordering defendants, Winkler, Willis, Ramirez, their successors, agent, employees and all persons acting in concert with them to protect plaintiffs from deprivation of basic human needs and threats of irreparable pain and suffering.
- (2) Compell defendants to perform their duties under Federal Bureau of Prisons rules

and the United States Constitution.

- (3) Move defendants to make available "legitimate" administrative remedies.
- (4) Order defendant Ramirez to respond reasonably without deliberate indifference to plaintiffs medical treatment and needs and make medical decisions based on inmate needs not administration unprofessional interference of medical treatment
- (5) Order such additional relief as this Court may deem just and proper

Signed this 10<sup>th</sup> day of Feb., 2004.



Signature of Plaintiff

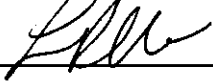
Michael A. Wall Michael A. Wall 3/10/04

Signature of other Plaintiffs  
(if necessary)

I declare under penalty of perjury that the foregoing is true and correct.

2/11/04  
Date

Michael A. Wall Michael A. Wall 3/10/04  
Signature of Plaintiff

  3-10-04  
Signature of other Plaintiffs  
(if necessary)